

ORDER FOR SUPPLIES AND SERVICES				IMPORTANT: See instructions in GSAR 553.370-300-1 for distribution		PAGE 1 OF 1 PAGE(S)	
1. DATE OF ORDER 09/25/2020		2. ORDER NUMBER 47QFNA20F0117		3. CONTRACT NUMBER 47QTCa20D0073		4. ACT NUMBER A22063410	
FOR GOVERNMENT USE ONLY	5. ACCOUNTING CLASSIFICATION				6. FINANCE DIVISION		
	FUND 285F	ORG CODE Q01FA000	B/A CODE AA20	O/C CODE 25	AC	SS	VENDOR NAME
	FUNC CODE AF151	C/E CODE H08	PROJ./PROS. NO.	CC-A	MDL	FI	G/L DEBT
	W/ITEM	CC-B	PRT./CRFT	AI	LC	DISCOUNT	
7. TO: CONTRACTOR (Name, address and zip code) b(6) MYRIDDIAN, LLC 6711 COLUMBIA GATEWAY DR STE 475 COLUMBIA, MD 21046-2724 United States b(6)				8. TYPE OF ORDER B. DELIVERY		REFERENCE YOUR	
				Please furnish the following on the terms specified on both sides of the order and the attached sheets, if any, including delivery as indicated.			
				This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above numbered contract.			
				C. MODIFICATION NO. P00000 TYPE OF MODIFICATION:		AUTHORITY FOR ISSUING	
9A. EMPLOYER'S IDENTIFICATION NUMBER b(6)		9B. CHECK, IF APPROP WITHHOLD 20%		Except as provided herein, all terms and conditions of the original order, as heretofore modified, remain unchanged.			
10A. CLASSIFICATION Woman Owned Business				10B. TYPE OF BUSINESS ORGANIZATION C. Corporation			
11. ISSUING OFFICE (Address, zip code, and telephone no.) Region 1 Contracting Douglas E. Punzel Thomas P. O'Neill Federal Building Boston, MA 02222-0000 United States (617) 565-5769		12. REMITTANCE ADDRESS (MANDATORY) MYRIDDIAN, LLC 6711 COLUMBIA GATEWAY DR STE 475 COLUMBIA, MD 21046-2724 United States		13. SHIP TO (Consignee address, zip code and telephone no.) Kesha M McClarin 1600 Clifton Road NE (M/S E61) Atlanta, GA 30333 United States 404-639-2474			
14. PLACE OF INSPECTION AND ACCEPTANCE Kesha M McClarin 1600 Clifton Road NE (M/S E61) Atlanta, GA 30333 United States		15. REQUISITION OFFICE (Name, symbol and telephone no.) Christina K Koski 10 CAUSEWAY ST BOSTON, MA 02222-1048 United States b(6)					
16. F.O.B. POINT Destination		17. GOVERNMENT B/L NO.		18. DELIVERY F.O.B. POINT ON OR BEFORE 09/24/2021		19. PAYMENT/DISCOUNT TERMS NET 30 DAYS / 0.00 % 0 DAYS / 0.00 % 0 DAYS	
20. SCHEDULE See attachments							
ITEM NO. (A)	SUPPLIES OR SERVICES (B)			QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
b(4)							
21. RECEIVING OFFICE (Name, symbol and telephone no.) Centers for Disease Control and Prevention, (404) 639-8563						TOTAL From 300-A(s)	
22. SHIPPING POINT Specified in QUOTE		23. GROSS SHIP WT.				GRAND TOTAL	b(4)
24. MAIL INVOICE TO: (Include zip code) General Services Administration (FUND) The contractor shall follow these Invoice Submission Instructions . The contractor shall submit invoices electronically by logging into the ASSIST portal (https://portal.fas.gsa.gov), navigating to the appropriate order, and creating the invoice for that order. For additional assistance contact the ASSIST Helpdesk at 877-472-4877. Do NOT submit any invoices directly to the GSA Finance Center (neither by mail nor via electronic submission).		25A. FOR INQUIRIES REGARDING PAYMENT CONTACT: GSA Finance Customer Support				25B. TELEPHONE NO. 816-926-7287	
		26A. NAME OF CONTRACTING/ORDERING OFFICER (Type) Douglas E. Punzel				26B. TELEPHONE NO. (617) 565-5769	
		26C. SIGNATURE Douglas E. Punzel 09/24/2020					
GENERAL SERVICES ADMINISTRATION				1. PAYING OFFICE		GSA FORM 300 (REV. 2-93)	

